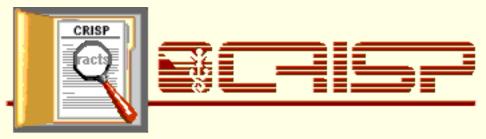
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Abstract

Grant Number: 1R01NR005343-01A1

PI Name: SWANSON, KRISTEN M.

PI Title:

Project Title: Caring Interventions for Couples Who Have Miscarried

Abstract: DESCRIPTION (provided by applicant): At least 1 in 5 pregnancies end in miscarriage, the spontaneous abortion of pregnancy prior to 20 weeks gestation. Comprehensive reviews of research summarize women's responses as ranging from relief to devastation with resolution taking from days to years. Men are likely to suppress feelings, feel sad about lost expectations, and experience powerlessness due to difficulty protecting and supporting their partner through an uncontrollable situation. It has been consistently demonstrated that after miscarriage women wish to discuss their loss and share it with their partners. Yet 85 percent of couples share their feelings to only a limited degree, if at all. The purpose of this randomized study is to compare the effects of nurse caring (3 nurse counseling sessions), self-caring (3 home-delivered videotapes and journals), combined caring (1 nurse counseling plus 3 videotapes and journals) and no intervention (control) on emotional healing, integration of loss, and couple well-being of women and their partners (husbands or male mates) in the first year after miscarrying. All intervention materials are based on the Principal Investigator's caring theory and *Meaning of Miscarriage model. The procedural aims are to (1) develop an empirically* derived self-caring intervention for couples that have miscarried. This home-delivered intervention will be a series of three modules consisting of broadcast quality videotapes ("Miscarriage: Caring and Healing") and journal assignments. (2) Train nurses to deliver a three session caring-based counseling intervention to couples. (3) Randomly assign couples that recently miscarried to one of four groups: group I (nurse caring) will receive three counseling sessions. Couples in group II (combined-caring) will receive one counseling session plus three self-caring videotape/journal modules; Group III (selfcaring) will receive the three self-caring videotape/journal modules. Group IV (control)

will receive no intervention. There are four hypothesis-testing specific aims and one exploratory research aim. 1) H1 Compared to controls, women and their partners who receive nurse, combined, or self-caring will report significantly more emotional healing, stronger integration of loss, and greater couple well-being in the first year subsequent to miscarriage. (2) H2 Comparing the three modes of delivering caring (nurse, combined, and self), for women and their partners, there will be no differences in emotional healing, integration of loss, and couple well-being. (3) H3 Comparing self-caring to combined-caring, for women and their partners, within and across intervention times, there will be no differences in intervention adherence and/or evaluation scores. (4) H4 Comparing the nurse-caring group to the combined-caring group, for women and their partners, there will be no differences in ratings of counselor empathy and caring at the first counseling session. (5) Determine associations amongst background variables, intervention monitoring scores, intervening variables, emotional healing, integration of loss, and couple well-being for women and their partners at 1 week, 6 weeks, 4 months and1 year post-enrollment.

Thesaurus Terms:

There are no thesaurus terms on file for this project.

Institution: UNIVERSITY OF WASHINGTON

3935 UNIVERSITY WAY NE

SEATTLE, WA 98195

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